

EL 465852241

Please type a plus sign (+) inside this box → PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. MI40-321

First Inventor or Application Identifier Roy Greeff et al.

Title A Communication System, Interrogators and Communication Methods

Express Mail Label No. EL465852241US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Specification [Total Pages 45]
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. Drawing(s) (35 U.S.C. 113) [Total Sheets 9]

4. Oath or Declaration [Total Pages 2]

- a. Newly executed (original or copy)
- b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

5. Microfiche Computer Program (Appendix) JC 84

6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. Computer Readable Copy
- b. Paper Copy (identical to computer copy)
- c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))

8. 37 C.F.R. § 3.73(b) Statement Power of
(when there is an assignee) Attorney

9. English Translation Document (if applicable)

10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
Citations

11. Preliminary Amendment

12. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

13. Small Entity Statement(s) Statement filed in prior application
(PTO/SB/09-12) Status still proper and desired

14. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

15. Other: Check for \$1,238.00

* NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment.

Continuation Divisional Continuation-in-part (CIP) of prior application No 09/146,764

Prior application information. Examiner D. Nguyen

Group / Art Unit 2745

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 021567 or Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name			
Address			
City	State	Zip Code	
Country	Telephone		Fax

Name (Print/Type)	James D. Shaurette	Registration No. (Attorney/Agent)	39,833
Signature			
	Date	1/8/01	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

FEE TRANSMITTAL

for FY 1999

Patent fees are subject to annual revision.

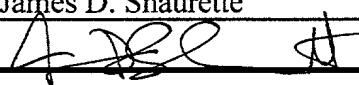
Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$1,238.00)

Complete if Known	
Application Number	FILED HEREWITH
Filing Date	FILED HEREWITH
First Named Inventor	Roy Greeff
Examiner Name	Unknown
Group / Art Unit	UNKNOWN
Attorney Docket No.	MI40-321

101/08/01

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. ADDITIONAL FEES	
Deposit Account Number	23-0925	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)
Deposit Account Name	Wells, St. John, Roberts, Gregory & Matkin	Fee	Fee
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17		Code (\$)	Fee
2. <input checked="" type="checkbox"/> Payment Enclosed:		105 130 205 65	Surcharge - late filing fee or oath
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		127 50 227 25	Surcharge - late provisional filing fee or cover sheet
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
101 760 201 380	Utility filing fee	Fee Paid	
		710.00	
106 310 206 155	Design filing fee		
107 480 207 240	Plant filing fee		
108 760 208 380	Reissue filing fee		
114 150 214 75	Provisional filing fee		
SUBTOTAL (1) (\$1,238.00)		710.00	
2. EXTRA CLAIM FEES			
Extra Claims	Fee from below	Fee Paid	
Total Claims 36	-20** = 16	X 18.00 = 288.00	
Independent Claims 6	-3*** = 3	X 80.00 = 240.00	
Multiple Dependent		= 0.00	
** or number previously paid, if greater; For Reissues, see below			
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
103 18 203 9	Claims in excess of 20		
102 78 202 39	Independent claims in excess of 3		
104 260 204 130	Multiple dependent claim, if not paid		
109 78 209 39	** Reissue independent claims over original patent		
110 18 210 9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2) (\$528.00)		0.00	
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$0.00)			

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	James D. Shaurette	Reg. Number	39,833
Signature		Date	1/8/01
		Deposit Account User ID	23-0925

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